INSTRUCTIONS
Rental Assistance Payment Requests

GETTING STARTED

You can find a blank workbook on MN Housing's website under: **Draw Request Forms and Participant Reporting Forms**. (*If this form has been revised, you should be notified with an e-mail message.*)

OPEN a new, blank workbook to start a new payment request. If you need the password, please contact a Rental Assistance staff member.

Do a "save as" and SAVE the workbook with the month of your payment request and your administrator name- program name. (i.e.: RA *Payment Request July 08 Name of Administrator-ELHIF*).

GENERAL INFO TAB

From the GENERAL INFO tab, hit the "Import data from a previous Report" button.

> *For first time payment requests, do not use the import data feature. Just use the "Edit" button and populate the yellow cells with your data. Please call if you need technical assistance.*

Enter OK when you see this message:

Find your previous payment request from wherever you have it filed. Select report and open. Wait for data to transfer.

Use the EDIT button to add or change grant data and contact information. Use the LOCK button when changes are complete.

On Line 9, be sure to use the drop down menu to select RA Program Type:

1		
2		**RENTAL ASSISTANCE PROGRAMS**
3	Minnesota	**Quarterly Funding Request Form**
4	Housing	
5	Finance Agency	For Bridges, HTF & ELHIF Funded RA Programs
6		Lock Print
7	1. GENERAL INFORMATION	
8	Agency Name:	
9	RA Program Type:	ELHIF-RA
10	MHFA ID Number (D#):	

Be sure to include the most recent grant and contact information on your request:

	A	B	C	D	E	F
1						
2			**RENTAL ASSISTANCE PROGRAMS**			
3	Minnesota		**Request for Reimbursement Form**			
4	Housing					
5	Finance Agency		For Bridges, HTF & ELHIF Funded RA Programs			
6			Edit Print			
7	1. GENERAL INFORMATION					
8	Agency Name:		Any County HRA			
9	RA Program Type:		ELHIF-RA			
10	MN Housing ID Number (D#):		D1234			
11	Project Number (MRA):		MRA12233			
12	Grant Amount:		$120,000.00			
13	Grant Expiration Date:		6/30/2009			
14	Agency Per Unit Administrative Fee		$50.00			
16	Target # HH:		10			
17	Target# LTH:		10			
18	Contact Name:		Jane Doe			
19	Contact Phone Number:		320-555-1234			
20	Contact Fax Number:		320-555-6789			
21	Contact Email Address:		jdoe@anycohra.com			

On Line 25, use drop down menu to select Rental Assistance Program. On Line 26 and 28, be sure to enter the correct month and year for your request. On line 32, be sure to enter the correct method of prorating that your agency uses.

24	2. REQUEST INFORMATION	
25	Rental Assistance Program	ELHIF-RA
26	Reimbursement for period beginning	March
27	Reimbursement for period ending	March
28	Beginning year of reimbursement period	2009
29	Ending year of reimbursement period	2009
30	Date Submitted:	3/15/09
31		
32	Prorate method used for RA, Contract Rent and UA.	Based on actual days of the month

MONTHLY LOGS

Be sure that all active participants are entered on the monthly log. **It is important to complete all yellow cells for each participant in order for the form to function correctly.** Many of the columns contain drop down lists: F, H, K, L, M, P, R, AI, AJ, AK, AL, etc.

Enter any new participants and any changes for existing participants on the monthly log. Be sure to enter a "YES" in column R for any participant who has been added or has had a change during the month.
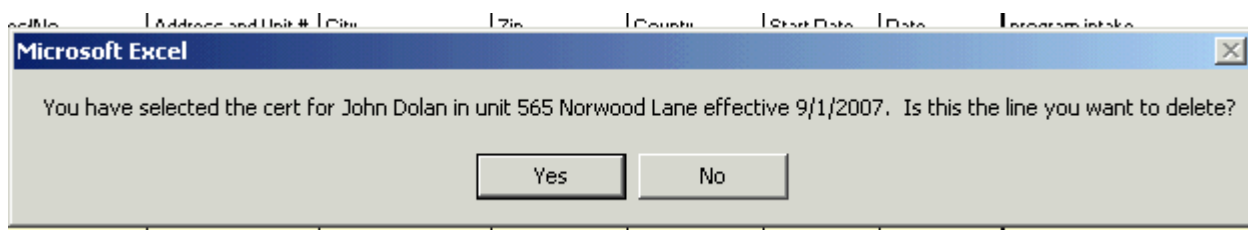
PRINT

Always use the PRINT button to print. The monthly log is set up to only print down to the end of the participant data entered.

Print	Delete a line	Sort by name	Sort by start date	Sort by effective date	Reset formulas
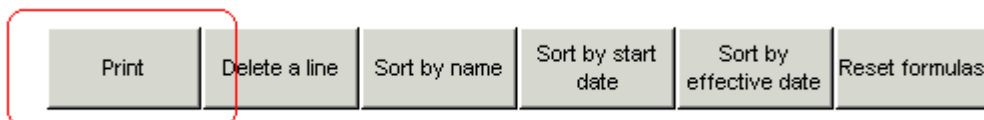
DELETE A LINE

Use this button if you need to delete a participant. You need to have your curser on the line you would like to delete (in column B). You will have a warning message prior to deleting a line. Once deleted, you can't recover a line of information.

Microsoft Excel

You have selected the cert for John Dolan in unit 565 Norwood Lane effective 9/1/2007. Is this the line you want to delete?

Yes   No

SORT

Change the way your logs are viewed. You may sort by **name** (participant last name-column B), **start date** (subsidy start date-column I) or **effective date** (certification effective date-column Q).

RESET FORMULAS

If you cleared a cell or cut some information and deleted the programming in a cell or cells, you can "reset" the formulas in a monthly log with this button.

COMMENTS

Column AT contains a "COMMENTS" section to add comments/notes to provide an explanation for a unique circumstance.

TERMINATION

With a termination, be sure to enter a "Subsidy End Date" in column J, enter a termination and date in columns P & Q and a termination reason in Column AS. These fields have been programmed to turn purple as a reminder.

Subsidy Start Date	Subsidy End Date
4/1/2007	3/31/2009

Reason for Certification	Effective Date
Termination	3/31/2009

Reason Participant Discontinued Program Participation

Select "Suspended" when you have a resident who is temporarily not receiving a subsidy (such as someone who is currently seeking new housing). Be sure to enter an explanation in the comments section, which will also turn blue as a reminder.

Reason for Certification	Effective Date		Comments
Suspended ▼	3/1/2009		

ADJUSTMENT TAB

If an adjustment is needed, be sure to include the participants name and an explanation of the adjustment. The adjustment tab now contains a DELETE A LINE feature.

RA FUNDING REQUEST

Lines 23, 28 & 29 are set up to automatically calculate from the data on the monthly log and adjustment tab:

		#LTH Households Assisted	Current Households Assisted	Rental Payments	Housing Related Expenses	Administrative Fees
19	Funds expended including total number of households, rental payments, housing related expenses and					
20	administrative fees paid from the monthly log will populate on line 23 below.					
22	Month					
23	March 2009	11	10	$5,514.00	$1,600.00	$500.00
24	Total Rental Payment and Housing Related Expenses Paid					$7,114.00
25	Total Admininstrative Fees Paid					$500.00
26	* Equals **Total Funds Expended and Reimbursed for this Period**					$7,614.00
27						
28	Add/subtract any other adjustments not otherwise listed above (explain in comments)					$0.00
29	* **Adjusted MN Housing Payment** (Funding Reimbursement +/- Adjustments)					$7,614.00
30	Signature of Administrator					
31	Signature of MN Housing					

The administrative fees will calculate automatically, based upon the number of households as long as the correct fees are entered into Line 14 on the General Info tab.

For questions or problems with the program, please call or e-mail your assigned technician:

Rosalie Kolb		Jennifer Nelson
651-297-4455	or	651-296-8148
Rosalie.kolb@state.mn.us		Jennifer.nelson@state.mn.us

Submit completed payment requests to:

rental.assistance@state.mn.us